# BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the First Amended	)	
Accusation and Petition to Revoke	)	
Probation Against:	)	
	)	
	)	
KEVIN FRANCIS CIRESI, M.D.	)	Case No. 800-2018-050121
	)	•
Physician's and Surgeon's	)	
Certificate No. G60858	)	
	)	
Respondent	)	
	)	

#### **DECISION**

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on July 25, 2019.

IT IS SO ORDERED: June 25, 2019.

MEDICAL BOARD OF CALIFORNIA

Ronald H. Lewis, M.D., Chair

Panel A

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1	Xavier Becerra		
'2	Attorney General of California STEVE DIEHL		
3	Supervising Deputy Attorney General MICHAEL C. BRUMMEL		
4	Deputy Attorney General State Bar No. 236116		
5	California Department of Justice		
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6	Telephone: (559) 705-2307 Facsimile: (559) 445-5106		
7	E-mail: Michael.Brummel@doj.ca.gov		
8	Attorneys for Complainant		
9	BEFORE THE		
10	MEDICAL BOARD OF CALIFORNIA		
11	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
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13			
14	In the Matter of the First Amended Accusation and Petition to Revoke Probation Against:		
15	OAH No. 2019030007		
16	KEVIN FRANCIS CIRESI, M.D. 7015 North Maple Ave., Suite 102 STIPULATED SETTLEMENT AND		
17	Fresno, CA 93720 DISCIPLINARY ORDER		
18	Physician's and Surgeon's Certificate No. G 60858		
19	Respondent.		
20			
21	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-		
22	entitled proceedings that the following matters are true:		
23	PARTIES		
24	1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical		
25	Board of California (Board). She brought this action solely in her official capacity and is		
26	represented in this matter by Xavier Becerra, Attorney General of the State of California, by		
27	Michael C. Brummel, Deputy Attorney General.		
28	2. Respondent Kevin Francis Ciresi, M.D. (Respondent) is represented in this		
	, a representation of the state		

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proceeding by attorney John L. Fleer, whose address is: 1850 Mt. Diablo Blvd, Ste. 120 Walnut Creek, CA 94596.

3. On or about August 3, 1987, the Medical Board issued Physician's and Surgeon's Certificate Number G 60858 to Kevin Francis Ciresi, M.D. (Respondent). On or about April 10, 2002, an enforcement agreement was executed between Respondent and the Board resulting in a Public Letter of Reprimand being issued on November 4, 2002 in Case No. 12-2000-116221. On or about October 16, 2015, an Ex-Parte Interim Suspension Order was issued, immediately suspending Respondent's Physician's and Surgeon's certificate, pursuant to Government Code section 11529, and staying the suspension conditioned upon compliance with specific license restrictions. On or about November 20, 2015, an Interim Suspension Order was issued, immediately suspending Respondent's Physician's and Surgeon's certificate, pursuant to Government Code section 11529, and staying the suspension conditioned upon compliance with specific license restrictions. On or about November 10, 2016, Respondent's Physician's and Surgeon's Certificate was revoked, the revocation was stayed, and Respondent's Physician's and Surgeon's Certificate was placed on seven (7) years of probation subject to specific license restrictions. On or about February 13, 2019, a Cease Practice Order was issued prohibiting Respondent from the practice of medicine until the completion of a clinical diagnostic evaluation, at his own expense, and thirty days of negative biological fluid tests, indicating that he has not used, consumed, ingested, or administered to himself a prohibited substance or until a final decision has been issued on the Petition to Revoke Probation. On or about March 20, 2019, the Cease Practice Order was terminated, allowing Respondent to resume the practice of medicine subject to the restrictions of his probation conditions. The Physician's and Surgeon's Certificate is currently on a probationary status, and will expire on June 30, 2019, unless renewed.

#### **JURISDICTION**

4. The First Amended Accusation and Petition to Revoke Probation was filed before the Board, and is currently pending against Respondent. The First Amended Accusation and Petition to Revoke Probation and all other statutorily required documents were properly served on Respondent on May 1, 2019. Respondent timely filed his Notice of Defense contesting the First

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Amended Accusation and Petition to Revoke Probation. A copy of the First Amended Accusation and Petition to Revoke Probation is attached as Exhibit A and incorporated by reference.

#### ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in the First Amended Accusation and Petition to Revoke Probation. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation and Petition to Revoke Probation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

#### **CULPABILITY**

- 8. Respondent admits the truth of each and every charge and allegation in the First Amended Accusation and Petition to Revoke Probation.
- Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

#### **CONTINGENCY**

10. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the

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stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

- 11. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.
- 12. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

#### DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 60858 issued to Respondent Kevin Francis Ciresi, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for seven (7) years on the following terms and conditions.

CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from 2. the use of products or beverages containing alcohol.

3. <u>EDUCATION COURSE</u>. Within 60 calendar days of the effective date of this Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 40 hours per year, for each year of probation. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition.

4. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1. Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the First Amended Accusation and Petition to Revoke Probation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the program or not later than 15 calendar days after the effective date of the Decision, whichever is later.

5. <u>PSYCHIATRIC EVALUATION</u>. Within 30 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter may be required by the Board or its designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall consider any information provided by the Board or designee and any other information the psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all psychiatric evaluations and psychological testing.

Respondent shall comply with all restrictions or conditions recommended by the evaluating psychiatrist within 15 calendar days after being notified by the Board or its designee.

6. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology, at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders, and specializes in the area of addiction and substance abuse. Upon approval, Respondent shall undergo psychotherapy one time each week, and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy. In the event the frequency of psychotherapy treatment is modified, Respondent shall undergo psychotherapy no less than one time each month.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist with any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require Respondent to undergo psychiatric evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of

probation, Respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is mentally fit to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

7. <u>CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS</u>: Within thirty (30) calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as may be required by the Board or its designee, Respondent shall undergo and complete a clinical diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed board certified physician and surgeon. The examiner shall consider any information provided by the Board or its designee and any other information he or she deems relevant, and shall furnish a written evaluation report to the Board or its designee.

The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of physicians and surgeons with substance abuse disorders, and is approved by the Board or its designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable professional standards for conducting substance abuse clinical diagnostic evaluations. The evaluator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and independent evaluation. The clinical diagnostic evaluation report shall set forth, in the evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a threat to himself or herself or others, and recommendations for substance abuse treatment, practice restrictions, or other recommendations related to Respondent's rehabilitation and ability to practice safely. If the evaluator determines during the evaluation process that Respondent is a threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24) hours of such a determination.

In formulating his or her opinion as to whether Respondent is safe to return to either parttime or full-time practice and what restrictions or recommendations should be imposed, including

 participation in an inpatient or outpatient treatment program, the evaluator shall consider the following factors: Respondent's license type; Respondent's history; Respondent's documented length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use); Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical history and current medical condition; the nature, duration and severity of Respondent's substance abuse problem or problems; and whether Respondent is a threat to himself or herself or the public.

For all clinical diagnostic evaluations, a final written report shall be provided to the Board no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator requests additional information or time to complete the evaluation and report, an extension may be granted, but shall not exceed thirty (30) days from the date the evaluator was originally assigned the matter.

The Board shall review the clinical diagnostic evaluation report within five (5) business days of receipt to determine whether Respondent is safe to return to either part-time or full-time practice and what restrictions or recommendations shall be imposed on Respondent based on the recommendations made by the evaluator. Respondent shall not be returned to practice until he or she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of Regulations.

Clinical diagnostic evaluations conducted prior to the effective date of this Decision, may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic evaluation, including any and all testing deemed necessary by the examiner, the Board or its designee, shall be borne by the licensee.

Respondent shall not engage in the practice of medicine until notified by the Board or its designee that he or she is fit to practice medicine safely. The period of time that Respondent is not practicing medicine shall not be counted toward completion of the term of probation.

Respondent shall undergo biological fluid testing as required in this Decision at least two (2)

times per week while awaiting the notification from the Board if he or she is fit to practice medicine safely.

Respondent shall comply with all restrictions or conditions recommended by the examiner conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified by the Board or its designee.

8. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff privileges.

9. <u>BIOLOGICAL FLUID TESTING</u>. Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order a Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by the Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing

be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all of the following standards:

- (a) Its specimen collectors are either certified by the Drug and Alcohol Testing
  Industry Association or have completed the training required to serve as a collector for the
  United States Department of Transportation.
- (b) Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.
- (c) Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.
  - (d) Its specimen collectors observe the collection of testing specimens.
- (e) Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.
- (g) Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
  - (i) It maintains testing sites located throughout California.
  - (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-

line computer database that allows the Respondent to check in daily for testing.

- (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff access to drug test results and compliance reporting information that is available 24 hours a day.
- (l) It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- (m) It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if the Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of non-negative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself or herself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited

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substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his or her treating physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

Notwithstanding any other provision of this Disciplinary Order, if the Board confirms that a positive biological fluid test is evidence of a prohibited substance, the Board shall automatically revoke Respondent's physician's and surgeon's certificate. Upon revocation of the physician's and surgeon's certificate, Respondent may request a hearing within 30 days of the revocation. The proceeding shall be conducted in accordance with the Administrative Procedure Act (Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code). Any proposed decision or decision that contains a finding of fact that a positive biological fluid test is evidence of a prohibited substance shall contain an order of revocation. The revocation shall not be stayed.

of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its prior approval, the name of a substance abuse support group which he or she shall attend for the duration of probation. Respondent shall attend substance abuse support group meetings at least once per week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse support group meeting costs.

The facilitator of the substance abuse support group meeting shall have a minimum of three (3) years experience in the treatment and rehabilitation of substance abuse, and shall be

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licensed or certified by the state or nationally certified organizations. The facilitator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. Respondent's previous participation in a substance abuse group support meeting led by the same facilitator does not constitute a prohibited current or former financial, personal, or business relationship.

The facilitator shall provide a signed document to the Board or its designee showing Respondent's name, the group name, the date and location of the meeting, Respondent's attendance, and Respondent's level of participation and progress. The facilitator shall report any unexcused absence by Respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

11. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work

environment on as frequent a basis as determined by the Board or its designee, but not less than four times per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance; (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring

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## VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING <u>LICENSEES</u>. Failure to fully comply with any term or condition of probation is a violation of

- If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
- (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of determining the length of time a Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he or she may do so.
  - (2) Increase the frequency of biological fluid testing.
- (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee.
- B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
  - (1) Issue a cease-practice order;
  - (2) Order practice limitations;
  - (3) Order or increase supervision of Respondent;
  - (4) Order increased documentation;
  - (5) Issue a citation and fine, or a warning letter;
  - (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in

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27 28 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense;

- (7) Take any other action as determined by the Board or its designee.
- C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he or she has violated any term or condition of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 13. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

- 14. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES. During probation, Respondent is prohibited from supervising physician assistants and advanced practice nurses.
- 15. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.
- 16. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has

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been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

#### GENERAL PROBATION REQUIREMENTS.

#### Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

#### Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

#### Place of Practice

Respondent shall not engage in the practice of medicine in Respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

#### License Renewal

Respondent shall maintain a current and renewed California physician's and surgeon's license.

#### Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event Respondent should leave the State of California to reside or to practice ,Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

18. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the

probation unit office, with or without prior notice throughout the term of probation.

or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If Respondent resides in California and is considered to be in non-practice, Respondent shall comply with all terms and conditions of probation. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice and does not relieve Respondent from complying with all the terms and conditions of probation. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete the Federation of State Medical Board's Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years. Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or Controlled Substances; and Biological Fluid Testing.

- 20. <u>COMPLETION OF PROBATION</u>. Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.
- 21. <u>LICENSE SURRENDER</u>. Following the effective date of this Decision, if Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request to surrender his or her license. The Board reserves the right to evaluate Respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.
- 22. PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

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#### **ACCEPTANCE**

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, John L. Fleer. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 13 May 19

KEVIN FRANCIS CIRESLIM.D.,

Respondent

I have read and fully discussed with Respondent Kevin Francis Ciresi, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.

I approve its form and content.

DATED: May 13, 2019

JOHN L. FLEER Attorney for Respondent

#### **ENDORSEMENT**

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated:

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
STEVE DIEHL
Supervising Deputy Attorney General

MICHAEL C. BRUMMEL Deputy Attorney General Attorneys for Complainant

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#### **ACCEPTANCE**

I have carefully read the above Stipulated Settlement and Disciplinary Order and have f	ully
discussed it with my attorney, John L. Fleer. I understand the stipulation and the effect it will	
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Decision and Order of the Medical Board of California.	٠.

DATED:

KEVIN FRANCIS CIRESI, M.D.

Respondent

I have read and fully discussed with Respondent Kevin Francis Ciresi, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.

DATED:

I approve its form and content.

JOHN L. FLEER Attorney for Respondent

#### **ENDORSEMENT**

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated:

5/16/19

Respectfully submitted,

XAVIER BECERRA Attorney General of California STEVE DIEHL

Supervising Deputy Attorney General

MICHAEL C. BRUMMEL Deputy Attorney General Attorneys for Complainant

### Exhibit A

First Amended Accusation and Petition to Revoke Probation

	•				
1	XAVIER BECERRA				
2	Attorney General of California STEVE DIEHL	FILED			
3	Supervising Deputy Attorney General Michael C. Brummel	STATE OF CALIFORNIA			
	Deputy Attorney General	MEDICAL BOARD OF CALIFORNIA			
4	State Bar No. 236116 California Department of Justice	SACRAMENTO/Ney 20/9 BY ANALYST			
5	2550 Mariposa Mall, Room 5090 Fresno, CA 93721	, will of			
6	Telephone: (559) 705-2307	1			
7	Facsimile: (559) 445-5106 E-mail: <u>Michael.Brummel@doj.ca.gov</u>				
8	Attorneys for Complainant				
9					
10	BEFOR	R. THE			
11	MEDICAL BOARD	OF CALIFORNIA			
1	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA				
12					
13					
14	In the Matter of the First Amended Accusation	Case No. 800-2018-050121			
15	and Petition to Revoke Probation Against:	FIRST AMENDED ACCUSATION AND			
16	Kevin Francis Ciresi, M.D.	PETITION TO REVOKE PROBATION			
17	7015 North Maple Ave., Suite 102 Fresno, CA 93720				
18	Physician's and Surgeon's Certificate				
19	No. G 60858,				
	Respondent				
20					
21					
22	Complainant alleges:				
23	<u>PAR'</u>	<u>FIES</u>			
24	1. Kimberly Kirchmeyer (Complainant) brings this First Amended Accusation and				
25	Petition to Revoke Probation solely in her official capacity as the Executive Director of the				
26	Medical Board of California, Department of Consumer Affairs (Board).				
27	2. On or about August 3, 1987, the Medical Board issued Physician's and Surgeon's				
28	Certificate Number G 60858 to Kevin Francis Ciresi, M.D. (Respondent). On or about April 10,				
	(KEVIN FRANCIS CIRESI, M.D.) FIRST AMENDED ACCUSATION AND PETITION TO REVOKE PROBATION NO. 800-2018-050121				

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2002, an enforcement agreement was executed between Respondent and the Board resulting in a Public Letter of Reprimand being issued on November 4, 2002 in Case No. 12-2000-116221. On or about October 16, 2015, an Ex-Parte Interim Suspension Order was issued, immediately suspending Respondent's Physician's and Surgeon's certificate, pursuant to Government Code section 11529, and staying the suspension conditioned upon compliance with specific license restrictions. On or about November 20, 2015, an Interim Suspension Order was issued, immediately suspending Respondent's Physician's and Surgeon's certificate, pursuant to Government Code section 11529, and staying the suspension conditioned upon compliance with specific license restrictions. On or about November 10, 2016, Respondent's Physician's and Surgeon's Certificate was revoked, the revocation was stayed, and Respondent's Physician's and Surgeon's Certificate was placed on seven (7) years of probation subject to specific license restrictions. On or about February 13, 2019, a Cease Practice Order was issued prohibiting Respondent from the practice of medicine until the completion of a clinical diagnostic evaluation. at his own expense, and thirty days of negative biological fluid tests, indicating that he has not used, consumed, ingested, or administered to himself a prohibited substance or until a final decision has been issued on the Petition to Revoke Probation. On or about March 20, 2019, the Cease Practice Order was terminated, allowing Respondent to resume the practice of medicine subject to the restrictions of his probation conditions. The Physician's and Surgeon's Certificate was on probationary status at all times relevant to the charges brought herein and will expire on June 30, 2019, unless renewed.

#### **JURISDICTION**

- 3. This First Amended Accusation and Petition to Revoke Probation, which supersedes both the Accusation and Petition to Revoke Probation filed on February 6, 2019 in the above-entitled matter, and the Petition to Revoke Probation filed on February 28, 2019 in case number 800-2019-053179, is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
  - 4. Section 2227 of the Code states:
  - "(a) A licensee whose matter has been heard by an administrative law judge of the

Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provision of this chapter:

- "(1) Have his or her license revoked upon order of the board.
- "(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board."
- "(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.
- "(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.
- "(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.
- "(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1."
  - 5. Section 2234 of the Code, states:

"The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.
  - "(b) Gross negligence.

- "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions. An initial negligent act or omission followed by a separate and distinct departure from the applicable standard of care shall constitute repeated negligent acts.
- "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.
- "(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.
  - "(d) Incompetence.
- "(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.
  - "(f) Any action or conduct which would have warranted the denial of a certificate,
- "(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.
- "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board."
  - 6. Section 2236 of the Code states:
- "(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.

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"(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to be a conviction within the meaning of this section and Section 2236.1. The record of conviction shall be conclusive evidence of the fact that the conviction occurred."

#### 7. Section 2239 of the Code states:

- "(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.
- "(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The Medical Board may order discipline of the licensee in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment."

#### 8. California Code of Regulations, title 16, section 1360, states:

"For the purposes of denial, suspension or revocation of a license, certificate or permit pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered to be substantially related to the qualifications, functions or duties of a person holding a license, certificate or permit under the Medical Practice Act if to a substantial degree it evidences present or potential unfitness of a person holding a license, certificate or permit to perform the functions authorized by the license, certificate or permit in a manner consistent with

the public health, safety or welfare. Such crimes or acts shall include but not be limited to the following: Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision of the Medical Practice Act."

- 9. California Code of Regulations, Title 16, Section 1361.52, states:
- "(a) A licensee who does any of the following shall be deemed to have committed a major violation of his or her probation:
  - "(1) Fails to undergo a required clinical diagnostic evaluation;
  - "(2) Commits multiple minor violations of probation conditions and terms;
  - "(3) Treats a patient or patients while under the influence of a prohibited substance;
- "(4) Engage in any drug or alcohol related act that is a violation of state or federal law or regulation;
  - "(5) Fails to undergo biological fluid testing when ordered;
  - "(6) Uses, consumes, ingests, or administers to himself or herself a prohibited substance;
- "(7) Knowingly uses, makes, alters, or possesses any object or product in such a way as to defraud or attempt to defraud a biological fluid test designed to detect the presence of a prohibited substance; or
- "(8) Fails to comply with any term or condition of his or her probation that impairs public safety.
- "(b) If a licensee commits a major violation, the Board will take one or more of the following actions:
- "(1) Issue an immediate cease-practice order and order the licensee to undergo a clinical diagnostic evaluation at the expense of the licensee. Any order issued by the Board pursuant to this subsection shall state that the licensee must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice.
  - "(2) Increase the frequency of biological fluid testing.
- "(3) Refer the licensee for further disciplinary action, such as suspension, revocation, or other action as determined by the Board.

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#### 11. Term and Condition 3 of the Probation Order states:

"ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the use of products or beverages containing alcohol.

"If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. Respondent shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 15 days of the notification to cease practice. If Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide Respondent with a hearing within 30 days of the request, unless Respondent stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

"If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of a such a request, the notification of cease practice shall be dissolved."

#### 12. Term and Condition 14 of the Probation Order states:

"OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders."

#### 13. Term and Condition 5 of the Probation Order states:

"BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order Respondent to undergo a biological fluid test on any day, at any time,

including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by Respondent.

"During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

"Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all the following standards:

- "A. Its specimen collectors are either certified by the Drug and Alcohol Testing
  Industry Association or have completed the training required to serve as a collector for the United
  States Department of Transportation.
  - "B. Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.
- "C. Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.
  - "D. Its specimen collectors observe the collection of testing specimens.
- "E. Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- "F. Its testing locations shall submit a specimen to a laboratory within one (I) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The

Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.

- "G. Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- "H. Its testing locations are able to scientifically test for mine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
  - "I. It maintains testing sites located throughout California.
- "J. It maintains an automated 24-hour toll-free telephone system and/or a secure online computer database that allows Respondent to check in daily for testing.
- "K. It maintains a secure, HIPAA-compliant website or computer system that allows staff access to drug test results and compliance reporting information that is available 24 hours a day.
- "L. It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- "M. It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if Respondent holds a valid prescription for the substance.

"Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

"The contract shall require that the laboratory directly notify the Board or its designee of nonnegative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

"A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

"If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

"A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

"After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his treating physician(s), other health care provider, or group facilitator, as applicable.

"For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of Respondent's urine, blood, breath, or hair.

"For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself.

"If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation."

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Order or increase supervision of Respondent;

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#### FIRST CAUSE FOR DISCIPLINE

### (Conviction of a Crime)

- 16. Respondent has subjected his Physician's and Surgeon's Certificate No. G 60858 to disciplinary action under section 2227, as defined by section 2236, in that he was convicted of an offense substantially related to the qualifications, functions or duties of a physician and surgeon. The circumstances are as follows:
- 17. On or about Friday, January 12, 2018, at approximately 2230 hours, a police officer observed Respondent driving very slowly eastbound in a parking lot in Rancho Santa Margarita, California. Respondent's head was resting against the glass of the driver's side window as the vehicle continued in motion. The officer followed Respondent to conduct a welfare check. Respondent stopped his vehicle in a parking lot, and the officer parked behind him and illuminated Respondent's vehicle with his spotlight. Simultaneously, the Orange County Sheriff's Department dispatch assigned two additional deputies to respond to complaints of a possible drunk driver with a vehicle description and license plate identical to the vehicle driven by Respondent.
- 18. The police officer contacted Respondent, and asked for a copy of his driver license, vehicle registration and proof of insurance. Respondent had bloodshot eyes, slurred speech and an odor of alcohol was emitting from his breath and within his vehicle. Respondent looked in his wallet, but was unable to provide the officer with any of the identifying personal information requested. After the officer repeated his request for a copy of his driver license, vehicle registration and proof of insurance, Respondent gave the officer his credit card. The officer was able to see in plain sight a 200 mL bottle of Vodka, containing no more than 2 oz. of liquid, laying on the driver's side floorboard.
- 19. The officer requested that Respondent exit his vehicle and walk several steps over to the front of the patrol vehicle. Respondent had difficulty getting out of his car, stumbled and grabbed for the driver's door to pull himself out of the car. When he exited the vehicle, Respondent was clothed, but only wearing a single slip on shoe. The officer retrieved the missing shoe for him from inside the vehicle, and Respondent struggled to slip his foot into the slip on

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shoe. The officer searched Respondent, and during the search, the officer observed a strong odor of alcohol coming from his breath and person. Respondent refused to tell the officer how much he had to drink, when he started drinking, when he stopped drinking, or where he was drinking. At the police officer's request, Respondent agreed to perform standard field sobriety tests.

- Respondent participated in a number of field sobriety tests, including the horizontal gaze nystagmus, one leg stand, walk and turn, and preliminary alcohol screening (PAS) tests. The tests were performed in the parking lot, which was flat, free of debris, and well lit. During the horizontal gaze nystagmus test, Respondent exhibited a lack of smooth pursuit in both eyes, sustained maximum deviation in both eyes, an angle of onset prior to forty-five degrees in both eyes, and vertical nystaginus. Respondent swayed back and forth approximately two inches during the test. Prior to the one leg stand test, Respondent continued to sway back and forth during the officer's explanation of the test and demonstration. During the one leg stand test, Respondent failed to stay in the starting position as instructed, attempted twice but was unable to raise his right leg before placing it down, hopping, and nearly losing his balance. Respondent was unable to perform the test and the officer instructed Respondent to stop for his own safety. During the walk and turn test, Respondent was unable to stay in the starting position, initiated the test prior to being instructed to begin by the officer, placed his hands behind his back, and took six steps that were all off of the line. The officer instructed him to stop the test for his own safety, Respondent provided breath samples that indicated a .238% blood alcohol level at 2304, and a .244% blood alcohol level at 2313.
- 21. The police officer placed Respondent under arrest for driving under the influence of alcohol. Respondent chose to provide a sample for a blood draw and was transported to the local intake release center for a blood draw that was taken on January 13, 2018, at approximately 0008 hours. The blood sample revealed that Respondent had a blood alcohol level of .251%.
- 22. On or about January 18, 2018, in a criminal proceeding entitled *People of the State of California vs. Kevin Francis Ciresi*, Case No. 18HM02467, Respondent was charged with violations of Vehicle Code sections 23152(a) and 23152(b) with special enhancements pursuant to Vehicle Code section 23578 for excessive blood alcohol level.

- 23. On or about July 16, 2018, in a criminal proceeding entitled *People of the State of California vs. Kevin Francis Ciresi*, Case No. 18HM02467, Respondent was charged in the First Amended Complaint with violations of Vehicle Code sections 23152(a) and 23152(b) with special enhancements pursuant to Vehicle Code section 23578 for excessive blood alcohol level, and special enhancements related to two prior convictions for driving under the influence of alcohol occurring on April 8, 2008, and February 19, 2015.
- 24. On or about October 11, 2018, in a criminal proceeding entitled *People of the State of California vs. Kevin Francis Ciresi*, Case No. 18HM02467, Respondent was convicted upon his plea of guilty to charges of Vehicle Code section 23152(b) (driving with a blood alcohol content of .08% or more), and Vehicle Code section 23152(a) (driving under the influence of alcohol or drugs), both misdemeanors, with the admission of sentence enhancements for an excessive blood alcohol level and two prior convictions. On the change of plea form, Respondent wrote that he "unlawfully and willfully drove a motor vehicle on a highway while under the influence of alcohol and while my blood alcohol content was over the legal limit of .08%, to wit: .25%. At the time, I also sustained two prior convictions...on 2/24/2016 and 9/30/2008." The Court sentenced Respondent to five (5) years' informal probation and ordered him to serve 270 days in jail, pay fines and fees, abstain from alcoholic beverages, abstain from any establishment where the primary purpose is to sell alcohol, not to drive with any measurable amount of alcohol in his blood, submit to chemical testing by any peace officer, submit to search and seizure while on probation, and complete an 18-month multiple offender alcohol program.
- 25. On or about August 28, 2018, Respondent participated in a voluntary interview with investigators from the Medical Board of California. Respondent admitted that he is an alcoholic and described his drinking on January 12, 2018, as a relapse. According to Respondent, he worked from approximately 0730 to 1400 hours on January 12, 2018 without eating breakfast or lunch. After work, Respondent planned to drive approximately five hours from Fresno to Rancho Santa Margarita for a business meeting and dinner with his employer. Prior to leaving Fresno, Respondent stopped at a grocery store near his office and purchased two bottles of Vodka, a 750 mL bottle and a 200 mL bottle respectively. Respondent began drinking in the parking lot of the

grocery store, then continued to drink while driving to Rancho Santa Margarita. He stated that he has no memory of driving erratically prior to his arrest, but admits that he was intoxicated while driving. Respondent admitted that he was aware of the conditions of his probation, and that he violated his probation by consuming alcohol while on probation. Respondent stated that he had not attended an AA meeting since the September prior to his arrest, and was dealing with several stressful issues in his personal life at the time of the arrest.

### SECOND CAUSE FOR DISCIPLINE

### (Unlawful / Dangerous Use of Alcohol)

- 26. Respondent has subjected his Physician's and Surgeon's Certificate No. G 60858 to disciplinary action under section 2227, as defined by section 2239, in that he used alcohol to the extent, and/or in such a manner as to be dangerous or injurious to himself, and/or to any other person or to the public, and/or to the extent that such use impaired his ability to practice medicine safely and/or was convicted of more than one misdemeanor or any felony involving the use of alcohol. The circumstances are as follows:
- 27. The allegations contained in paragraphs 15 through 23 are incorporated by reference as if set forth fully herein.
- 28. On or about October 1, 2004, officers observed Respondent driving a BMW at a high rate of speed in Contra Costa County. The officers followed Respondent and watched as he stopped approximately 20 yards past the solid white crosswalk line at a red light. Respondent remained stopped in the intersection. The officers conducted a traffic stop and immediately noticed that Respondent appeared disoriented and confused. The officers described Respondent in their report as appearing lethargic, slurring his speech and smelling of alcohol. The officers concluded that Respondent was too intoxicated to safely perform standard field sobriety tests. Respondent provided two consensual breath samples that evinced a blood alcohol level of .20% and .22%. Respondent was arrested for driving a vehicle under the influence of alcohol in violation of Vehicle Code sections 23152(a) and 23152(b). Subsequently, the Contra Costa County District Attorney filed a Criminal Complaint for alleging violations of the Vehicle Code including a misdemeanor violation of Vehicle Code section 23152 (a) [driving a vehicle under the

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influence].

- 29. On or about November 17, 2004, Respondent pled nolo contendre and was convicted of one misdemeanor count of Vehicle Code section 23152 (a) [driving a vehicle under the influence] in Pleasanton Municipal Court Case No. 113654 in Contra Costa County.
- 30. Following his 2004 conviction, Respondent attended several alcohol treatment programs including a 30-day program in Dana Point, a 90-day program at Betty Ford, and a sixweek program in Louisiana. Respondent also attended counseling, psychotherapy and participated in Alcoholics Anonymous meetings.
- 31. On or about May 31, 2006, officers from the Contra Costa Sheriff's Department observed Respondent driving a black Mercedes approximately twenty miles over the speed limit. Respondent immediately exhibited obvious signs of intoxication when contacted by officers, including red, watery eyes and a strong odor of an alcoholic beverage on his breath and/or person. Respondent told officers that he had consumed two or three glasses of scotch at his office and was driving to his daughter's softball game. Respondent failed to perform the standard field sobriety tests and elected to provide a consensual breath sample. The initial breath sample resulted in a blood alcohol level of .25%. Officers arrested the Respondent and transported him to the San Ramon Police Department (SRPD). While en route to the SRPD, Respondent asked the officers if they would "just drive him home and forget about this." Respondent explained to them that he had previously been the victim of a stabbing which he felt was poorly investigated by the SRPD. Respondent suggested that they take him "home and let this go to pay him back" for the poor investigation. After officers declined, Respondent told them that this was "a sad situation. I am a plastic surgeon at San Ramon Regional Medical Center and I may get called to help you officers.' When officers asked him what he meant, he only said "it would be unethical" and provided no further clarification. At the SRPD, Respondent provided two additional breath samples which resulted in a blood alcohol level of .23% and .22%.
- 32. On or about June 28, 2006, the Contra Costa County District Attorney filed a Criminal Complaint alleging a misdemeanor violation of Vehicle Code section 23152 (a) [driving a vehicle under the influence] including an enhancement for a prior conviction within ten years

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pursuant Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578.

- 33. On or about October 4, 2006, Respondent pled nolo contendre and was convicted in Contra Costa County Superior Court of one misdemeanor count of Vehicle Code section 23152 (b) [driving a vehicle with a blood alcohol level of 0.08 or higher] including an admission of the enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578.
- 34. Following his 2006 arrest and conviction, Respondent participated in the Board's former diversion program. Respondent participated in an evaluation and completed a 90-day residential treatment program at Betty Ford.
- On or about April 8, 2008, a civilian observed Respondent driving a BMW in an erratic manner, crossing over the dividing lines on each side of his lane and drifting dangerously close to the vehicles in the nearest lane while traveling on the 680 freeway in Contra Costa County. The witness called 911 and followed the Respondent's vehicle as he exited the freeway and remained on surface streets until the police arrived. When officers arrived, Respondent crashed his BMW into a small tree, resulting in damage to the rear bumper of his vehicle. Respondent attempted to walk towards the officers but staggered side to side and needed to lean on the BMW to maintain his balance. When the officers asked him to present his driver's license, he had difficulty retrieving it and dropped his wallet on the ground. Officers smelled a strong odor of alcoholic beverages on Respondent and suspected that he may be under the influence of alcohol. Officers requested that Respondent exit his vehicle so that they could administer the standard field sobriety tests. Respondent emerged from his vehicle with a lit cigarette in his hand, which officers requested that he extinguish prior to the field sobriety tests. Respondent dropped it to the ground and attempted to step on the lit cigarette to extinguish it but he was unable to do so, missing the cigarette completely. During questioning, prior to the commencement of the field sobriety tests, Respondent stated that he had had "too much Scotch" to drink. Respondent declined to participate in the field sobriety tests stating that he was "...too drunk to do this" and explaining to the officers, "look, we both know that I'm drunk."

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Respondent provided two consensual breath samples that evinced a blood alcohol level of .20% and .20%.

- 36. On or about July 11, 2008, the Contra Costa County District Attorney filed a Criminal Complaint alleging misdemeanor violations of Vehicle Code section 23152 (a) [driving a vehicle under the influence], 23152 (b) [driving a vehicle with a blood alcohol level of .08% or higher], 20002(a) [hit and run driving, and Penal Code section 1203.3 [violation of the terms and conditions of probation]. The charges included enhancements for multiple prior convictions within ten years pursuant to Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol level over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578. (Exhibit E, Certified Copy of Criminal Complaint and Court Docket in Case No. 01-127536-1.)
- 37. On or about September 30, 2008, Respondent pled nolo contendre and was convicted of one misdemeanor count of Vehicle Code section 23152 (b) [driving a vehicle with a blood alcohol level of 0.08 or higher] in the Contra Costa County Superior Court with the admission of two prior convictions. Respondent was sentenced and ordered to serve 110 days in custody by electronic home detention, wear a SCRAM bracelet, abstain from drug and alcohol use, participate in counseling, complete a residential treatment program, pay fines and fees, and was designated as a habitual traffic offender.
- 38. Following his 2008 arrest and conviction, Respondent participated in a six-week residential alcohol program.
- 39. On or about February 19, 2015, at approximately 8:39 p.m., Officer Gibbs of the California Highway Patrol encountered Respondent in the driver's seat of a BMW in Fresno County. Respondent's vehicle was stopped in the middle of the Avenue 16 off-ramp blocking the roadway. Officer Gibbs made contact with Respondent and immediately noticed a strong odor of an alcoholic beverage. Respondent was wearing blue hospital scrubs and brown clogs, and was

<sup>&</sup>lt;sup>1</sup> Respondent's prior convictions as alleged, included a violation date of October 1, 2004, which resulted in a conviction of Vehicle Code section 23152(a) on or about November 17, 2004 in Pleasanton Municipal Court; and a violation date of June 1, 2006, resulting a conviction of Vehicle Code section 23152(a) on or about October 6, 2006 in Contra Costa Superior Court.

generally cooperative towards the investigating officers. He reported that he had no injuries,
medical conditions, or medications affecting his impairment. Respondent explained that he had
consumed five to six shots of Jameson Irish Whiskey between 6:00 p.m. and 6:45 p.m. at his
Sacramento plastic surgery facility known as Lifestyle Lift. After finishing his whiskey,
Respondent drove his BMW from Sacramento to Fresno until he ran out of gas and could go no
further. Respondent told the officers that he did not know where he was at that time. Respondent
failed every standard field sobriety test administered. During the Horizontal Gaze Nystagmus, h
exhibited an onset of nystagmus prior to 45 degrees and had difficulty tracking with his eyes
without also moving his head. Respondent started the Romberg test before being asked, swayed
back and forth from side to side 2 inches from the center and estimated a period of 30 seconds to
be 50 seconds. He began the Hand Pat test prior to being asked, was unable to speed up the pace
of his hands when counting aloud, failed to count aloud when instructed and was unable to match
the audible count to the appropriate hand pat. Respondent was only able to complete two of the
three Finger Count tests after counting very slowly and being unable to match up his audible
count to the appropriate finger touch. He provided two consensual breath samples that exhibited
a blood alcohol level of .216% and .213% respectively. Approximately one hour later,
Respondent participated in a second breath test at the California Highway Patrol Office in
Madera. Respondent's two breath samples at the CHP office were taken more than an hour after
he was first contacted by law enforcement on the highway off-ramp and evinced a blood alcohol
level of 0.20% and 0.19%. Respondent was arrested and transported to the Madera County Jail
for booking at approximately 10:40 p.m.

40. On or about October 9, 2015, the Madera County District Attorney filed a Criminal Complaint alleging misdemeanor violations of Vehicle Code section 23152 (a) [driving a vehicle under the influence] and 23152 (b) [driving a vehicle with a blood alcohol level of .08% or higher]. The charges included enhancements for two prior convictions within ten years pursuant to Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578.

- 41. On or about October 16, 2015, in a prior disciplinary action entitled In the Matter of the Ex-Parte Interim Suspension Order Against Kevin Francis Ciresi, M.D. before the Medical Board of California, in Case No. 800-2015-012225, Respondent's Physician's and Surgeon's Certificate No. G 60858 was suspended, and the suspension was stayed as long as Respondent complied with numerous restrictions pending a regularly noticed hearing pursuant to Government Code section 11529, subdivision (d). That decision is now final and is incorporated by reference as if fully set forth herein.
- 42. On or about November 20, 2015, in a prior disciplinary action entitled *In the Matter of the Interim Suspension Order Against Kevin Francis Ciresi, M.D.* before the Medical Board of California, in Case No. 800-2015-012225, Respondent's Physician's and Surgeon's Certificate No. G 60858 was suspended, and the suspension was stayed as long as Respondent complied with numerous restrictions. That decision is now final and is incorporated by reference as if fully set forth herein.
- 43. On or about November 10, 2016, in a prior disciplinary action entitled In the Matter of the Accusation Against Kevin Francis Ciresi, M.D. before the Medical Board of California, in Case No. 800-2015-012225, Respondent's Physician's and Surgeon's Certificate No. G 60858 was suspended, with the suspension stayed and Respondent placed on probation for seven (7) years for allegations involving the conviction of crimes substantially related to the practice of medicine and the use of alcohol in such a manner as to be dangerous or injurious to himself, or to any other person or to the public. That decision is now final and is incorporated by reference as if fully set forth herein.
- 44. On or about February 4, 2017, in a criminal proceeding entitled *People of the State of California vs. Kevin Francis Ciresi*, Superior Court of California, County of Madera Case No. CCR050352, Respondent was convicted upon his plea of nolo contendere to a charge of Vehicle Code section 23152(b) (driving with a blood alcohol content of .08% or more), a misdemeanor, admitted to two prior convictions, as discussed herein under the First Cause of Action, and stipulated to a blood alcohol level of 0.22%. Respondent was sentenced and ordered to serve 120 days in custody (118 days suspended and two days credited for time served), 364 days on the

SCRAM program, not to drive a vehicle with any measurable amount of alcohol in his blood, to submit to alcohol detection tests as directed by any peace officer, pay fines and fees, and to complete a third time offender driving under the influence program.

#### THIRD CAUSE FOR DISCIPLINE

### (Conduct Warranting Denial of a Certificate)

45. Respondent has subjected his Physician's and Surgeon's License No. G 60858 to disciplinary action under section 2227, as defined by section 2234, subdivision (f), in that he engaged in action or conduct that would have warranted the denial of a certificate, as more particularly alleged in paragraphs 17 through 25, which are hereby incorporated by reference and realleged as if fully set forth herein.

#### FOURTH CAUSE FOR DISCIPLINE

# (Violation of the Medical Practice Act)

46. Respondent has subjected his Physician's and Surgeon's License No. G 60858 to disciplinary action under section 2227, as defined by section 2234, subdivision (a), in that he violated or attempted to violate, directly or indirectly the Medical Practice Act, as more particularly alleged in paragraphs 17 through 25, which are hereby incorporated by reference and realleged as if fully set forth herein.

## FIFTH CAUSE FOR DISCIPLINE

#### (Incompetence)

47. Respondent has subjected his Physician's and Surgeon's License No. G 60858 to disciplinary action under section 2227, as defined by section 2234, subdivision (d), of the Code, in that he committed incompetence in the care and treatment of Patient A<sup>2</sup>, as more particularly alleged hereafter:

## PATIENT A

48. Respondent was hired to conduct utilization reviews for an insurance company, separate from his normal plastic surgery practice. Respondent typically reviewed cases that involved the upper extremity with regard to general surgery, as well as cutaneous plastic surgery

<sup>&</sup>lt;sup>2</sup> Actual patient names are redacted from this pleading to protect the privacy of the patient.
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type cases. Prior to Respondent's review, cases selected for review by the insurance company were screened by another health care professional. Respondent would "review the cases, and then submit [his] decision on the request, based on the medical data presented and review of the literature, and the standards — and the standards that they set, the MTUS<sup>3</sup> guidelines." Respondent was compensated per hour for his review of a case by the insurance company. Respondent stated that if the insurance company asked him to review a matter that was outside his scope of medicine, he "would refuse to do it, and send it back to them." Respondent stated that he no longer works for the insurance company because they terminated the relationship after learning that he was on probation.

- 49. On or about November 24, 2015, Patient A presented to her treating physician for a dermatology consultation. Patient A's history included extensive medical issues including Lupus and Scleroderma and she was presently complaining of worsening rash. Patient A reported a constant burning and stinging sensation from the rash causing her pain at a level of 8/10. The treating physician documented widespread excoriations on her head, neck, trunk, abdomen, upper and lower extremities. The treating physician diagnosed Patient A with nonspecific eruption Xerosis, and Eczematous Dermatitis. The treating physician requested authorization from Patient A's insurance company for prescriptions of Lidex<sup>4</sup> cream, EpiCeram<sup>5</sup>, and a skin biopsy of the rash. Patient A's insurance company elected to conduct a utilization review prior to authorizing the request, and assigned Respondent to review her case.
- 50. On or about December 31, 2015, Respondent received Patient A's file to conduct a utilization review of the treatment recommended by her treating physician. Respondent wrote that there was "no evidence based literature to support their use and efficacy over any other

<sup>3</sup> Medical Treatment Utilization Schedule (MTUS) is a set of regulations that contain medical treatment guidelines and rules for determining what is reasonable and necessary medical care in the State of California.

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<sup>&</sup>lt;sup>4</sup> Fluocinonide topical (Fluocinonide-E, Vanos, Ldex, Licon, Lidex E, Dermacin, Fluex) is a steroid. It prevents the release of substances in the body that cause inflammation. Fluocinonide topical is used to treat the inflammation and itching caused by a number of skin conditions such as allergic reactions, eczema, and psoriasis.

<sup>&</sup>lt;sup>3</sup> EpiCeram Skin Barrier is a topical nonsteroidal lipid barrier emulsion used to manage symptoms of burning and itching associated with dry skin conditions including atopic dermatitis, irritant contact dermatitis, radiation dermatitis and other dermatoses.

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product even over the counter preparations." Respondent denied the use of prescription topical agents for the treatment of Patient A's rash. Respondent only approved the request for a biopsy, noting "biopsy of any suspicious skin lesion when suspect is certainly supported in any best practice of medicine."

- On or about August 28, 2018, Respondent participated in a voluntary interview with investigators from the Medical Board of California during which he addressed the care and treatment of Patient A. Respondent reviewed pertinent records that were provided to him through a portal from the insurance company, but not the entire medical record for Patient A. He stated that he was only provided a one-paragraph summary with the prior physician's consultation for review rather than the entire records related to Patient A. Respondent stated that he believed "the Epi cream is got - uh - I think it's got some cholesterol in it, and it's some - it's an emollient." Respondent incorrectly stated that "Lidex cream is just a topical anesthetic." After being informed that he was incorrect, Respondent stated, "All right. I'm looking at the wrong thing here. I'm thinking of something I use. Um - yeah, that was the gist of my understanding." Respondent denied the use of the EpiCeram and Lidex for Patient A's rash, citing to an article from the American Journal of Dermatology in support of his denial. In fact, the article cited by Respondent actually supported the use of corticosteroids and EpiCeram for Patient A's rash. During his interview, Respondent was allowed to review the literature that he had previously cited to deny the prescriptions of Lidex and EpiCeram for Patient A. After reviewing the article, Respondent was unable to explain why he denied the prescriptions, but agreed that the data is "contradictory" to the recommendation that he gave in Patient A's case. When asked if he was pressured by the insurance company, Respondent replied, "Um—I would like to think that I would act independently of any nonmedical influence." Upon further review of the case, Respondent stated that he "might come to a different conclusion" and "probably would have approved it."
- 52. The standard of care for a physician and surgeon performing a utilization review is to carefully review all of the provided medical information of the patient, consult with the treating physician if needed, evaluate treatment guidelines and/or the medical literature, and authorize the

treatment if a similar specialist would recommend this treatment as medically necessary in the community.

- 53. Respondent agreed to review Patient A's case for the insurance company, despite only being provided a one paragraph summary by the treating physician. Respondent did not contact the treating physician for more information, contact the insurance company to request additional records, or decline to review the case.
- 54. Respondent denied the request of the treating physician to prescribe Lidex and EpiCeram to Patient A for her rash. Respondent demonstrated a lack of knowledge regarding these medications. Respondent did not know the main component of EpiCeram, and incorrectly asserted that Lidex, a steroid, was a topical anesthetic. Respondent approved the treating physician's request for a skin biopsy; however, he mistakenly believed it was related to a mole or lesion when it was intended to be a biopsy of Patient A's rash.
- 55. Respondent lacked knowledge to appropriately review Patient A's case for the insurance company. As a plastic surgeon unfamiliar with Patient A's rash and the medications recommended by the treating physicians, Respondent could have returned the case to the insurance company. Respondent failed to recommend that the case be reviewed by a dermatologist who specializes in the treatment and management of cases similar to Patient A's rash.
- 56. Respondent failed to appropriately utilize applicable medical literature in the review of Patient A's case. Respondent justified his denial of the topical creams recommended by the treating physician by citing a published article. Respondent denied the prescription for Lidex, even though the very article he cited actually supported the use of Lidex in Patient A's case. Respondent denied the prescription for EpiCeram by citing a 2003 article that evaluated the necessity and best uses of barrier repair creams, even though EpiCeram was not approved for use until April 2006. Respondent failed to review literature published after the approval of EpiCeram. Respondent failed to consider the treating physician's observations of the patient's significant symptoms, physical examination, and the duration of Patient A's rash.

- 57. Respondent demonstrated incompetence in the care and treatment of Patient A, including, but not limited to the following:
- A. Paragraphs 46 through 54, are hereby incorporated by reference as if fully set forth herein;
- B. Respondent demonstrated a lack of knowledge regarding atopic dermatitis, complex rashes and their pharmaceutical management.

## FIRST CAUSE TO REVOKE PROBATION

(Violation of Probation: Condition #3, Alcohol – Abstain From Use)

- 58. Respondent's probation is subject to revocation, pursuant to probation condition three of the Probation Order, because he failed to abstain completely from the use of products or beverages containing alcohol. The circumstances are as follows:
- 59. The allegations contained in paragraphs 17 through 25 are incorporated by reference as if set forth fully herein.
- 60. On or about January 30, 2019, Respondent was randomly selected to participate in a biological fluid test pursuant to the requirements of his active probation. At approximately 11:50 a.m., Respondent provided a blood sample for testing which was sent to First Source Solutions analysis. Respondent's biological fluid test was positive for 27 ng/mL of Phosphatidyl Ethanol.
- 61. On or about February 7, 2019, Respondent discussed the positive biological fluid test with a representative of the Board's Probation Monitoring Unit. Respondent informed the probation department that he was incarcerated related to his prior conviction for driving under the influence of alcohol from December 19, 2018 through January 17, 2019. In a letter signed under penalty of perjury, Respondent denied the use of alcohol. Respondent later emailed the Probation Monitoring Unit requesting that a reconfirmation test be performed on his biological fluid sample.
- 62. On or about February 18, 2019, the Board received test results reconfirming the presence of alcohol in Respondent's January 30, 2019 biological fluid sample.
- 63. On or about February 13, 2019, a Cease Practice Order was issued prohibiting Respondent from the practice of medicine until the completion of a clinical diagnostic evaluation, at his own expense, and thirty days of negative biological fluid tests, indicating that he has not

used, consumed, ingested, or administered to himself a prohibited substance or until a final decision has been issued on the Petition to Revoke Probation in this matter.

#### SECOND CAUSE TO REVOKE PROBATION

(Violation of Probation: Condition #5, Biological Fluid Testing)

- 64. Respondent's probation is subject to revocation, pursuant to probation condition five of the Probation Order, because his biological fluid sample was positive for the presence of alcohol. The circumstances are as follows:
- 65. The allegations contained in paragraphs 17 through 25, and 60 through 63 are incorporated by reference as if set forth fully herein.

### THIRD CAUSE TO REVOKE PROBATION

(Violation of Probation: Condition #14, Obey All Laws)

- 66. Respondent's probation is subject to revocation, pursuant to probation condition fourteen of the Probation Order, because he failed to obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders. The circumstances are as follows:
- 67. The allegations contained in paragraphs 17 through 25, and 60 through 63 are incorporated by reference as if set forth fully herein.

#### DISCIPLINARY CONSIDERATIONS

- 68. To determine the degree of discipline, if any, to be imposed on Respondent, Complainant alleges as follows:
- 69. The allegations contained in paragraphs 17 through 25, 48 through 56, and 60 through 63, are incorporated by reference as if set forth fully herein.
- 70. Following his 2018 arrest, Respondent participated in a rehabilitation program from January 19 through March 19, 2018 at the Center for Professional Recovery in Santa Monica.
- 71. Respondent has previously attended rehabilitation programs at the Betty Ford Institute, Palmetto Recovery, and the Center for Professional Recovery. Respondent has previously participated or been ordered to comply with the following programs and/or restrictions: inpatient alcohol treatment programs, outpatient alcohol treatment programs,

SCRAM bracelet alcohol monitoring with weekly reporting, Soberlink breathalyzer with daily reporting, random urinalysis testing, worksite monitors, AA meetings 3 or more times per week, intensive psychotherapy, psychiatric treatment, and biological fluid testing. Respondent's most current term of probation, which is not yet complete, was for seven (7) years and included terms requiring him to abstain from the use of controlled substances, abstain from the use of alcohol, notify his employer of his probationary status, comply with biological fluid testing, attend substance abuse support group meetings, maintain a worksite monitor, complete an ethics course, obtain a psychiatric evaluation, participate in psychotherapy, and obey all laws.

#### **PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

- 1. Revoking the probation that was granted by the Medical Board of California in Case no. 800-2015-012225 and imposing the disciplinary order that was stayed thereby revoking Physician's and Surgeon's Certificate No. G 60858 issued to Kevin Francis Ciresi, M.D.
- 2. Revoking or suspending Physician's and Surgeon's Certificate Number G 60858, issued to Kevin Francis Ciresi, M.D.;
- 3. Revoking, suspending or denying approval of Kevin Francis Ciresi, M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 4. Ordering Kevin Francis Ciresi, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
  - 5. Taking such other and further action as deemed necessary and proper.

DATED: May 1, 2019

CIMBERLY KIRCHMEYER

Executive Director

Medical Board of California
Department of Consumer Affairs

State of California

Complainant

# BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

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### **DECISION**

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 10, 2016.

IT IS SO ORDERED: October 11, 2016.

MEDICAL BOARD OF CALIFORNIA

Jamie Wright, J.D., Chair

Panel A

	·				
	KAMALA D. HARRIS Attorney General of California				
,	VLADIMIR SHALKEVICH				
. 2	Acting Supervising Deputy Attorney General MICHAEL C. BRUMMEL	•			
3	Deputy Attorney General				
4	State Bar No. 236116 California Department of Justice 2550 Mariposa Mall, Room 5090				
5	Fresno, CA 93721				
6	Telephone: (559) 477-1679 Facsimile: (559) 445-5106				
	E-mail: Michael.Brummel@doj.ca.gov				
7	Attorneys for Complainant				
8					
. 9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS				
	STATE OF CALIFORNIA				
10	In the Matter of the Accusation Against:	Case No. 800-2015-012225			
11	1	·			
.12	KEVIN FRANCIS CIRESI, M.D. 7015 North Maple Ave., Suite 102	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER			
13	Fresno, CA 93720				
14	Physician's and Surgeon's Certificate No. G60858				
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16	Respondent,	• • •			
17	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-				
18	entitled proceedings that the following matters are true:				
19	<u>PAR</u>	<u>TIES</u>			
20	1. Kimberly Kirchmeyer ("Complainant") is the Executive Director of the Medical				
21	Board of California. She brought this action solely in her official capacity and is represented in				
22	this matter by Kamala D. Harris, Attorney General of the State of California, by Michael C.				
23	Brummel, Deputy Attorney General.				
24	2. Respondent Kevin Francis Ciresi, M.D. ("Respondent") is represented in this				
25	proceeding by attorney John L. Fleer, Esq., whose address is: 1850 Mt. Diablo Boulevard, Suite				
26	120 Walnut Creek, CA 94596.				
27	3. On or about August 3, 1987, the Medical Board of California issued Physician's and				
28	Surgeon's Certificate No. G60858 to Kevin Francis Ciresi, M.D. (Respondent). The Physician's				
	1	, , , , , , , , , , , , , , , , , , , ,			
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STIPULATED SETTLEMENT (800-2015-012225)

and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2015-012225 and will expire on June 30, 2017, unless renewed.

#### JURISDICTION

- 4. Accusation No. 800-2015-012225 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on November 10, 2015. Respondent timely filed his Notice of Defense contesting the Accusation.
- 5. A copy of Accusation No. 800-2015-012225 is attached as Exhibit A and incorporated herein by reference.

## **ADVISEMENT AND WAIVERS**

- 6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2015-012225. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

### CULPABILITY

9. Respondent admits the truth of each and every charge and allegation in Accusation No. 800-2015-012225.

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10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

# CONTINGENCY

- 11. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 12. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.
- 13. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

#### **DISCIPLINARY ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G60858 issued to Respondent Kevin Francis Ciresi, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for seven (7) years on the following terms and conditions.

1. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

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 2. <u>CONTROLLED SUBSTANCES - ABSTAIN FROM USE</u>. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

If Respondent has a confirmed positive biological fluid test for any substance (whether or not legally prescribed) and has not reported the use to the Board or its designee, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. Respondent shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 15 days of the notification to cease practice. If Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide Respondent with a hearing within 30 days of the request, unless Respondent stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of a such a request, the notification of cease practice shall be dissolved.

3. <u>ALCOHOL - ABSTAIN FROM USE</u>. Respondent shall abstain completely from the use of products or beverages containing alcohol.

If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of

medicine. Respondent shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 15 days of the notification to cease practice. If Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide Respondent with a hearing within 30 days of the request, unless Respondent stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of a such a request, the notification of cease practice shall be dissolved.

- 4. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring. For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when Respondent has medical staff privileges.
- 5. <u>BIOLOGICAL FLUID TESTING.</u> Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.

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The cost of biological fluid testing shall be borne by Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all the following standards:

- A. Its specimen collectors are either certified by the Drug and Alcohol Testing
  Industry Association or have completed the training required to serve as a collector for the United
  States Department of Transportation.
  - B: Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.
- C. Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.
  - D. Its specimen collectors observe the collection of testing specimens.
- E. Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- F. Its testing locations shall submit a specimen to a laboratory within one (I) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.

- G. Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- H. Its testing locations are able to scientifically test for mine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
  - I. It maintains testing sites located throughout California.
- J. It maintains an automated 24-hour toll-free telephone system and/or a secure online computer database that allows Respondent to check in daily for testing.
- K. It maintains a secure, HIPAA-compliant website or computer system that allows staff access to drug test results and compliance reporting information that is available 24 hours a day.
- L. It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- M. It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of nonnegative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing

medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his treating physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation.

6. <u>SUBSTANCE ABUSE SUPPORT GROUP MEETINGS</u>. Within thirty (30) days of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its prior approval, the name of a substance abuse support group which he shall attend for the duration of probation. Respondent shall attend substance abuse support group meetings at least once per week, or as ordered by the Board or its designee.

Respondent shall pay all substance abuse support group meeting costs.

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The facilitator of the substance abuse support group meeting shall have a minimum of three (3) years' experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or nationally certified organizations. The facilitator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. Respondent's previous participation in a substance abuse group support meeting led by the same facilitator does not constitute a prohibited current or former financial, personal, or business relationship.

The facilitator shall provide a signed document to the Board or its designee showing Respondent's name, the group name, the date and location of the meeting, Respondent's attendance, and Respondent's level of participation and progress. The facilitator shall report any unexcused absence by Respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

7. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee. The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

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Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance; (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the

practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

- 8. <u>VIOLATION OF PROBATION CONDITION FOR SUBSTANCE-ABUSING</u>
  <u>LICENSEES</u>. Failure to fully comply with any term or condition of probation is a violation of probation.
- A. If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
  - (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (e)(l), of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of the determining the length of time Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he may do so.
  - (2) Increase the frequency of biological fluid testing.
  - (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee. (Cal. Code Regs., tit. 16, § 1361.52, subd. (b).)
- B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
  - (1) Issue a cease-practice order;

- (2) Order practice limitations;
- (3) Order or increase supervision of Respondent;
- (4) Order increased documentation;
- (5) Issue a citation and fine, or a warning letter;
- (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(l), of Title 16 of the California Code of Regulations, at Respondent's expense;
- (7) Take any other action as determined by the Board or its designee. (Cal. Code Regs., tit. 16, § 1361.52, subd. (d).)
- C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he has violated any term or condition of probation. (See Cal. Code Regs., tit. 16, § 1361.52, subd. (e).) If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 9. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358. Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the

Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the program or not later than 15 calendar days after the effective date of the Decision, whichever is later.

10. <u>PSYCHIATRIC EVALUATION</u>. Within thirty (30) days of the effective date of this Decision, and on whatever periodic basis thereafter may be required by the Board or its designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological testing, if deemed necessary) by a Board-appointed certified psychiatrist, who shall consider any information provided by the Board or designee and any other information the psychiatrist deems relevant and shall furnish a written evaluation report to the Board or its designee. Psychiatric evaluations conducted prior to the effective date of this Decision, in the discretion of the Board or its designee, may be accepted toward fulfillment of this term and condition. Respondent shall pay the cost of all psychiatric evaluations and psychological testing.

Respondent shall comply with all restrictions and conditions recommended by the evaluating psychiatrist within 15 calendar days after being notified by the Board or its designee.

Respondent shall not engage in the practice of medicine until notified by the Board or its designee that Respondent is mentally fit to practice medicine safely. The period of time that Respondent is not practicing medicine shall not be counted toward completion of the term of probation.

11. <u>PSYCHOTHERAPY</u>. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of

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psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require Respondent to undergo psychiatric evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is mentally fit to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

NOTIFICATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

- 13. <u>SUPERVISION OF PHYSICIAN ASSISTANTS</u>. During probation, Respondent is prohibited from supervising physician assistants.
- 14. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

 15. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

# 16. GENERAL PROBATION REQUIREMENTS.

## Compliance with Probation Unit

Respondent shall comply with the Board's probation unit and all terms and conditions of this Decision.

### Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses-shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

### Place of Practice

Respondent shall not engage in the practice of medicine in Respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

#### License Renewal

Respondent shall maintain a current and renewed California physician's and surgeon's license.

#### Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event Respondent should leave the State of California to reside or to practice

Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of

· 28 departure and return.

- 17. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.
- 18. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine in California as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete a clinical training program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years. Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; and General Probation Requirements.

19. <u>COMPLETION OF PROBATION</u>. Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.

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20. VIOLATION OF PROBATION. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

- 21. LICENSE SURRENDER. Following the effective date of this Decision, if Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request to surrender his license. The Board reserves the right to evaluate Respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.
- 22. PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

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ACCEPTANCE I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully 3 4 discussed it with my attorney, John L. Floer, Esq.. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and 5 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the 6 Decision and Order of the Medical Board of California 7 DATED: 8 KEVIN FRANCIS CIRESI, M.D. 9 Respondent 10 11 I have read and fully discussed with Respondent Kevin Francis Ciresi, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. 12 13 I approve its form and content. DATED: 14 John L. Fleer, Esq. 15 Attorney for Respondent 16 **ENDORSEMENT** 17 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully 18 submitted for consideration by the Medical Board of California. 19 Respectfully submitted, 20 Dated: 21 KAMALA D. HARRIS 22 Attorney General of California JANE ZACK SIMON 23 Supervising Deputy Attorney General MICHAEL C. BRUMMEL 24 Deputy Attorney General 25 Attorneys for Complainant FR2015302226 26 95177958.doc 27 28 18 STIPULATED SETTLEMENT (800-2015-012225)

### ACCEPTANCE 2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, John L. Fleer, Esq. I understand the stipulation and the effect it 3 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and 4 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the 5 Decision and Order of the Medical Board of California. б DATED: 7 KEVIN FRANCIS CIRESI, M.D. 8 Respondent 10 I have read and fully discussed with Respondent Kevin Francis Ciresi, M.D. the terms and 11 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. 12 I approve its form and content. 13 DATED: John L. Fleer, Esq. 14 Attorney for Respondent 15 16 **ENDORSEMENT** 17 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully 18 submitted for consideration by the Medical Board of California. 19 9/2/2016 20 Dated: Respectfully submitted, 21 22 23 KAMALA D. HARRIS Attorney General of California 24 VLADIMIR SHALKEVICH Acting Supervising Deputy Attorney General 25 MICHAEL C. BRUMMEL Deputy Attorney General 26

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Attorneys for Complainant

# Exhibit A

Accusation No. 800-2015-012225

KAMALA D. HARRIS Attorney General of California JANE ZACK SIMON Supervising Deputy Attorney General 3 MICHAEL C. BRUMMEL Deputy Attorney General State Bar No. 236116 California Department of Justice 2550 Mariposa Mall, Room 5090 Fresno, CA 93721 Telephone: (559) 477-1679 Facsimile: (559) 445-5106 6 7 E-mail: Michael.Brummel@doj.ca.gov Attorneys for Complainant 8 BEFORE THE 9 MEDIČAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS 10 STATE OF CALIFORNIA 11 In the Matter of the Accusation Against: Case No. 800-2015-012225 12 Kevin Francis Ciresi, M.D. ACCUSATION 13 7015 N. Maple Avenue, Suite 102 Fresno, CA 93720-8010 14 Physician's and Surgeon's Certificate 15 No. G 60858. 16 Respondent. 17 1.8 Complainant alleges: 19 **PARTIES** 20 Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official 21 capacity as the Executive Director of the Medical Board of California, Department of Consumer 22 Affairs (Board). 23 On or about August 3, 1987, the Medical Board issued Physician's and Surgeon's 24 Certificate Number G 60858 to Kevin Francis Ciresi, M.D. (Respondent). On or about April 10, 25 2002, an enforcement agreement was executed between Respondent and the Board resulting in a 26 Public Letter of Reprimand being issued on November 4, 2002 in Case No. 12-2000-116221. On 27 The term "Board" means the Medical Board of California. "Division of Medical Quality" shall also be deemed to refer to the Board. 28

(KEVIN FRANCIS CIRESI, M.D.) ACCUSATION NO. 800-2015-012225

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or about October 16, 2015, Administrative Law Judge Marcie Larson issued an Interim Suspension Order immediately suspending Respondent's physician's and surgeon's certificate pursuant to Government Code section 11529 and staying the suspension conditioned upon compliance with specific license restrictions. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on June 30, 2017, unless renewed.

### **JURISDICTION**

- This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
  - 4. Section 2221 of the Code states:
- "(a) The board may deny a physician's and surgeon's license to any applicant guilty of unprofessional conduct or of any cause that would subject a licensee to revocation or suspension of his or her license; or, the board in its sole discretion, may issue a probationary physician's and surgeon's certificate to an applicant subject to terms and conditions, including, but not limited to, any of the following conditions of probation:
- "(1) Practice limited to a supervised, structured environment where the licensee's activities shall be supervised by another physician and surgeon.
  - "(2) Total or partial restrictions on drug prescribing privileges for controlled substances.
  - "(3) Continuing medical or psychiatric treatment.
  - "(4) Ongoing participation in a specified rehabilitation program.
  - "(5) Enrollment and successful completion of a clinical training program.
  - "(6) Abstention from the use of alcohol or drugs.
  - "(7) Restrictions against engaging in certain types of medical practice.
  - "(8) Compliance with all provisions of this chapter.
  - "(9) Payment of the cost of probation monitoring.
- "(b) The board may modify or terminate the terms and conditions imposed on the probationary certificate upon receipt of a petition from the licensee. The board may assign the petition to an administrative law judge designated in Section 11371 of the Government Code.

After a hearing on the petition, the administrative law judge shall provide a proposed decision to the board.

5. Section 2234 of the Code, states:

"The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.
  - "(f) Any action or conduct which would have warranted the denial of a certificate.
  - 6. Section 2236 of the Code states:
- "(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.
- "(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to be a conviction within the meaning of this section and Section 2236.1. The record of conviction shall be conclusive evidence of the fact that the conviction occurred."
  - Section 2239 of the Code states:
- "(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any

combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.

- "(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The Medical Board may order discipline of the licensee in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment."
  - 8. California Code of Regulations, title 16, section 1360, states:

"For the purposes of denial, suspension or revocation of a license, certificate or permit pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered to be substantially related to the qualifications, functions or duties of a person holding a license, certificate or permit under the Medical Practice Act if to a substantial degree it evidences present or potential unfitness of a person holding a license, certificate or permit to perform the functions authorized by the license, certificate or permit in a manner consistent with the public health, safety or welfare. Such crimes or acts shall include but not be limited to the following: Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision of the Medical Practice Act."

#### FIRST CAUSE FOR DISCIPLINE

# (Unprofessional Conduct / Conviction of a Substantially Related Crimes)

9. Respondent is subject to disciplinary action under sections 2234(a) and/or 2234(f) and/or 2236 in that he has been convicted of multiple offenses substantially related to the qualifications, functions or duties of a physician and surgeon which constitutes unprofessional conduct. The circumstances are as follows:

- (a) Respondent, is a physician specializing in plastic surgery, Board Certified by the American Board of Plastic Surgery. He resides in Walnut Creek and has regularly practiced medicine throughout California including in the counties of Contra Costa, Fresno, Kern and Sacramento. His current address of record with the Board is 7015 N. Maple Ave., Suite 102, Fresno, CA 93720-8010 which is also the address of his Fresno practice known as the Athenix Body Sculpting Institute.
- (b) On or about October 1, 2004, officers observed Respondent driving a BMW at a high rate of speed in the City of Dublin. The officers followed Respondent and watched as he stopped approximately 20 yards past the solid white crosswalk line at a red light. Respondent remained stopped in the intersection. The officers conducted a traffic stop and immediately noticed that Respondent appeared disoriented and confused. The officers described Respondent in their report as appearing lethargic, slurring his speech and smelling of alcohol. The officers concluded that he was too intoxicated to safely perform standard field sobriety tests. Respondent provided two consensual breath samples that evinced a blood alcohol level of .20% and .22%. Respondent was arrested for driving a vehicle under the influence of alcohol in violation of Vehicle Code sections 23152(a) and 23152(b).
- (c) The Contra Costa County District Attorney filed a Criminal Complaint alleging violations of the Vehicle Code including a misdemeanor violation of Vehicle Code section 23152 (a) [driving a vehicle under the influence]. On or about November 17, 2004, Respondent pled nolo contendre and was convicted of one misdemeanor count of Vehicle Code section 23152 (a) [driving a vehicle under the influence] in Pleasanton Municipal Court Case No. 113654. Respondent remembers being convicted of the charges but does not recall if he pled guilty or no contest.
- (d) On or about May 31, 2006, officers from the Contra Costa Sheriff's Department observed Respondent driving a black Mercedes approximately twenty miles over the speed limit. Respondent immediately exhibited obvious signs of intoxication when contacted by officers, including red, watery eyes and a strong odor of an alcoholic beverage on his breath and/or person. Respondent told officers that he had consumed two or three glasses of scotch at his office and was

driving to his daughter's softball game. Respondent failed to perform the standard field sobriety tests and elected to provide a consensual breath sample. The initial breath sample resulted in a blood alcohol level of .25%. Officers arrested the Respondent and transported him to the San Ramon Police Department ("SRPD"). While en route to the SRPD, Respondent asked the officers if they would "just drive him home and forget about this." Respondent explained to them that he had previously been the victim of a stabbing which he felt was poorly investigated by the SRPD. Respondent suggested that they take him "home and let this go to pay him back" for the poor investigation. After officers declined, Respondent told them that this was "a sad situation. I am a plastic surgeon at San Ramon Regional Medical Center and I may get called to help you officers." When officers asked him what he meant, he only said "it would be unethical" and provided no further clarification. At the SRPD, Respondent provided two additional breath samples which resulted in a blood alcohol level of .23% and .22%.

- (e) On or about June 28, 2006, the Contra Costa County District Attorney filed a Criminal Complaint alleging a misdemeanor violation of Vehicle Code section 23152 (a) [driving a vehicle under the influence] including an enhancement for a prior conviction within ten years pursuant Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578. On or about October 4, 2006, Respondent pled nolo contendre and was convicted in Contra Costa County Superior Court of one misdemeanor count of Vehicle Code section 23152 (b) [driving a vehicle with a blood alcohol level of 0.08 or higher] including an admission of the enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578. On or about October 4, 2006, Respondent pled nolo contendre and was convicted of one misdemeanor count of Vehicle Code section 23152 (b) [driving a vehicle with a blood alcohol level of 0.08 or higher] and admitted the high blood alcohol and prior conviction enhancements.
- (f) On or about April 8, 2008, a civilian observed Respondent driving a BMW in an erratic manner, crossing over the dividing lines on each side of his lane and drifting dangerously close to the vehicles in the nearest lane while traveling on the 680 freeway. The

witness called 911 and followed the Respondent's vehicle as he exited the freeway and remained on surface streets until the police arrived. When officers arrived, Respondent crashed his BMW into a small tree, resulting in damage to the rear bumper of his vehicle. Respondent attempted to walk toward the officers but staggered side to side and needed to lean on the BMW to maintain his balance. When the officers asked him to present his driver's license he had difficulty retrieving it and dropped his wallet on the ground. Officers smelled a strong odor of alcoholic beverages on Respondent and suspected that he may be under the influence of alcohol. Officers requested that Respondent exit his vehicle so that they could administer the standard field sobriety tests. Respondent emerged from his vehicle with a lit cigarette in his hand which officers requested that he extinguish prior to the field sobriety tests. Respondent dropped it to the ground and attempted to step on the lit cigarette to extinguish it but he was unable to do so, missing the cigarette completely. During questioning, prior to the commencement of the field sobriety tests. Respondent stated that he had had "too much Scotch" to drink. Respondent declined to participate in the field sobriety tests stating that he was "...too drunk to do this" and explaining to the officers, "look, we both know that I'm drunk." Respondent provided two consensual breath samples that evinced a blood alcohol level of .20% and .20%.

Criminal Complaint alleging misdemeanor violations of Vehicle Code section 23152 (a) [driving a vehicle under the influence], 23152 (b) [driving a vehicle with a blood alcohol level of .08% or higher], 20002(a) [hit and run driving, and Penal Code section 1203.3 [violation of the terms and conditions of probation]. The charges included enhancements for two prior convictions within ten years pursuant Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578. On or about September 30, 2008, Respondent pled nolo contendre and was, convicted of one misdemeanor count of Vehicle Code section 23152 (b) [driving a vehicle with a blood alcohol level of 0.08 or higher] in the Contra Costa County Superior Court with the admission of two prior convictions. Respondent was sentenced and ordered to serve 110 days in custody by electronic home detention, wear a SCRAM bracelet, abstain from drug and alcohol

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use, participate in counseling, complete a residential treatment program, pay fines and fees, and was designated as a habitual traffic offender.

### SECOND CAUSE FOR DISCIPLINE

## (Unprofessional Conduct / Use of Controlled Substances)

- 10. Respondent is subject to disciplinary action under sections 2234(a) and/or 2234(f) and/or 2239 in that he used alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to himself, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or has been convicted of more than one misdemeanor involving the use, consumption, or self-administration of alcohol which constitutes unprofessional conduct. The circumstances include those as set forth above in paragraph 9 which are incorporated as if set forth fully herein, and as follows:
- On or about February 19, 2015, at approximately 8:39 p.m., Officer Gibbs of the California Highway Patrol encountered Respondent in the driver's seat of a BMW. Respondent's vehicle was stopped in the middle of the Avenue 16 off-ramp blocking the roadway. Officer Gibbs made contact with Respondent and immediately noticed a strong odor of an alcoholic beverage. Respondent was wearing blue hospital scrubs and brown clogs, and was generally cooperative towards the investigating officers. He reported that he had no injuries. medical conditions, or medications affecting his impairment. Respondent explained that he had consumed five to six shots of Jameson Irish Whiskey between 6:00 p.m. and 6:45 p.m. at his Sacramento plastic surgery facility known as Lifestyle Lift. After finishing his whiskey, Respondent drove his BMW from Sacramento to Fresno until he ran out of gas and could go no further. Respondent told the officers that he didn't know where he was. Respondent failed every standard field sobriety test administered. During the Horizontal Gaze Nystagmus he exhibited an onset of nystagmus prior to 45 degrees and had difficulty tracking with his eyes without also moving his head. Respondent started the Romberg test before being asked, swayed back and forth from side to side 2 inches from the center and estimated a period of 30 seconds to be 50 seconds. He began the Hand Pat test prior to being asked, was unable to speed up the pace of his hands when counting aloud, failed to count aloud when instructed and was unable to match the

audible count to the appropriate hand pat. Respondent was only able to complete two of the three Finger Count tests after counting very slowly and being unable to match his audible count to the appropriate finger touch. He provided two consensual breath samples that exhibited a blood alcohol level of .216% and .213% respectively. Approximately one hour later, Respondent participated in a second breath test at the California Highway Patrol Office in Madera. Respondent's two breath samples at the CHP office were taken more than an hour after he was first contacted by law enforcement on the highway off-ramp and evinced a blood alcohol level of 0.20% and 0.19%. Respondent was arrested and transported to the Madera County Jail for booking at approximately 10:40 p.m.

(b) On or about October 9, 2015, the Madera County District Attorney filed a Criminal Complaint alleging misdemeanor violations of Vehicle Code section 23152 (a) [driving a vehicle under the influence] and 23152 (b) [driving a vehicle with a blood alcohol level of .08% or higher]. The charges included enhancements for two prior convictions within ten years pursuant Vehicle Code section 23217 and an enhancement for driving under the influence with a blood alcohol over .15% [excessive blood alcohol] pursuant to Vehicle Code section 23578. On or about November 4, 2015, Respondent was arraigned in Madera County Superior Court.

### **PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

- 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 60858, issued to Kevin Francis Ciresi, M.D.;
- 2. Revoking, suspending or denying approval of Kevin Francis Ciresi, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
- 3. Ordering Kevin Francis Ciresi, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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2	DATED: November 10, 2015	KIMBERLY KIRCHMEYER
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4		Department of Consumer Affairs State of California
5		Complainant
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